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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/540,214	03/31/2000	Jay S. Walker	00-006	9740
22927 75	590 10/08/2004		EXAMINER	
WALKER DIGITAL			. DURAN, ARTHUR D	
FIVE HIGH RIDGE PARK STAMFORD, CT 06905			ART UNIT	PAPER NUMBER
			3622	3622
			DATE MAIL ED. 10/09/2004	

Please find below and/or attached an Office communication concerning this application or proceeding.

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	Application No.	Applicant(s)				
Interview Summary	09/540,214	WALKER ET AL.				
morrion danimary	Examiner	Art Unit				
	Arthur Duran	3622				
All participants (applicant, applicant's representative, PTO personnel):						
(1) <u>Arthur Duran</u> .	(3)					
(2) <u>Jason Schinter</u> .	(4)					
Date of Interview: <u>17 September 2004</u> .						
Type: a)⊠ Telephonic b)□ Video Conference c)□ Personal [copy given to: 1)□ applicant 2)□ applicant's representative]						
Exhibit shown or demonstration conducted: d) ☐ Yes e) ☐ No. If Yes, brief description:						
Claim(s) discussed:						
Identification of prior art discussed:						
Agreement with respect to the claims f)☐ was reached. g)□ was not reached. h)□ N	I/A.				
Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: <u>The action sent out on 6/22/04 is a Non-Final Rejection.</u> The body of the Office <u>Action is written as a Non-Final Rejection.</u> The Action was recorded in PALM as a Non-Final action. The timeframes for a Non-Final Rejection apply.						
(A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.)						
THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN ONE MONTH FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.						
	Moto	M				
Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.	Examiner's signa	ature, if required				